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Bib Data Sheet

CONFIRMATION NO. 6331

<b>SERIAL NUMBER</b> 10/824,238	<b>FILING OR 371(c) DATE</b> 04/13/2004 <b>RULE</b>	<b>CLASS</b> 029	<b>GROUP ART UNIT</b> 3729	<b>ATTORNEY DOCKET NO.</b> 501188.04 (30174/US/3)
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**APPLICANTS**  
Jigish D. Trivedi, Boise, ID;

**\*\* CONTINUING DATA \*\*\*\*\***  
This application is a CON of 10/290,958 11/07/2002 PAT 6,740,575 which is a DIV of 10/211,476 08/01/2002 PAT 6,683,365

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
06/24/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials <i>MT</i>	<b>STATE OR COUNTRY</b> ID	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> <del>2</del> 10	<b>INDEPENDENT CLAIMS</b> <del>5</del> 2
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**ADDRESS**  
Kinton N. Eng. Esq.  
DORSEY & WHITNEY LLP  
Suite 3400  
1420 Fifth Avenue  
Seattle, WA 98101

**TITLE**  
METHOD FOR FORMING AN ANTIFUSE

<b>FILING FEE RECEIVED</b> 1068	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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